INFORMATION & INSTRUCTIONS - MORTGAGE SOLICITOR

Access this form via website at: www.state.hi.us/dcca/pvl

APPLICATION FORM

Type or print legibly in black ink and sign the application. Answer all questions. Any misstatement is grounds for refusal or subsequent revocation of license. Incomplete and/or irregular applications will not be accepted. Applicants are subject to requirements in effect at time of filing.

· Failure to provide all the requested information will delay the processing of your application.

FEES

** If applying for licensure between January 1, even-numbered year, to December 31, even-numbered year, pay......\$85 (Appl Fee - \$25*, License Fee - \$25, CRF - \$35)

Attach check or money order made payable to: COMMERCE AND CONSUMER AFFAIRS.

- * Application fee is not refundable.
- ** Subject to renewal by December 31, even-numbered years.

Note: One of the numerous legal requirements that you must meet in order for your new license to issue is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Chapter 91, Hawaii Revised Statutes, and Title 16, Chapter 201, Hawaii Administrative Rules. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

DESIGNATED PRINCIPAL MORTGAGE SOLICITOR

IN ADDITION to this application for Mortgage Solicitor (MB-02), the following are required:

- 1. Complete Application for Registration Designated Principal Mortgage Solicitor (MB-13).
- 2. Attach Experience Certificate (MB-03) and \$25 application fee.

Contact our office or you may download the forms from our website at: www.state.hi.us/dcca/pvl.

PROGRAM'S ADDRESS

Mail all required items to:

Mortgage Brokers and Solicitors DCCA, PVL Licensing Branch P.O. Box 3469 or Honolulu, HI 96801 Deliver to office location at: 1010 Richards St., 1st Floor Honolulu, HI 96813 Phone: (808) 586-3000

LAWS

To obtain a copy of the Mortgage Broker and Solicitors law, Chapter 454, Hawaii Revised Statutes, send 50¢ to: Cashier, Commerce and Consumer Affairs, P.O. Box 541, Honolulu, HI 96809. Chapter 436B, Hawaii Revised Statutes, the Professional and Vocational Licensing Law may be purchased separately for 75¢. Make check payable to: COMMERCE AND CONSUMER AFFAIRS. (*Price subject to change without notice.*)

The laws are posted on our website at: www.state.hi.us/dcca/pvl, then click the specific board/program. The laws will be posted during the fall of 2001.

BIENNIAL RENEWAL

A mortgage solicitor license, regardless of issuance date, is renewable biennially on or before December 31 of each even-numbered year. Failure to renew license (payment of fees and completed renewal application form) on or before December 31, even-numbered year shall constitute an automatic forfeiture of license.

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000 to submit your request.

MB-16 1201R

APPLICATION FOR LICENSE - MORTGAGE SOLICITOR

Leg	al Name (First-Middle)	(LAST)			Effective Date	License No. MS-	
				>-		1	
Res	idence Address (Include Apt. No., City, State, an	d Zip Code)		ONLY			
				OR OFFICE USE			
Mai	ling Address (ONLY if different from residence)			FICE			
				ROF			
				뎐			
Tele	ephone No. (Days)	Social Security No.					
Circ	ele or underline answers. Explain as needed.						
1)	Are you at least 18 years of age?					YES	NO
2)	Are you a U.S. citizen, a U.S. national, or an alie	en authorized to work in the United State	es ?			YES	NO
3)	Have you ever used any other name(s)? If so, what name(s)?					YES	NO
4)	Have you ever held a mortgage broker or solicite (Type/Lic No:					YES	NO
5)	Have you ever held any other license(s)?					YES	NO
6)	Have you ever had any license suspended, revo (If response is "yes", provide details on a separa		action?			YES	NO
7)	Have you ever been employed by any business subject to disciplinary action?					YES	NO
8)	In the past 20 years, have you ever been convict been annulled or expunged?					YES	NO
9)	Have you ever had or are there any pending law (If response is "yes", provide details on a separa		· liens agains	t you'	?	YES	NO
API	PLICANT CERTIFICATION:						
cert	I hereby certify that I shall engage in the busine ify that the answers on this application are true ar	ess of mortgage solicitor only for the lice and correct to the best of my knowledge.	ensed mortga	ige br	roker who is designated on	this application. I a	also
	Date				Signature of Applicant		
EM	PLOYER CERTIFICATION:				- y		
mor	It is hereby certified that the person named on tgage brokerage in the State of Hawaii.	this application will be employed by the	undersigned	, who	is duly licensed to engage	in the business of	
IIIOI	I certify that upon termination of the applicant fi						
	Circulture of Decimental Dringing Marting Col	latter.	Name of F				
	Signature of Designated Principal Mortgage Sol	IGIUI	Name of E	шрю	yei		
	Print Name		Address o	f Emp	oloyer		
	Date		License N	o. <u>M</u>	В-	MBB-	

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 Appl
 416.
 \$25

 Lic
 415.
 \$25/50

 ½ Renewal
 413.
 \$25/50

 CRF
 C13.
 \$35/70

 Service Fee
 BCF
 \$15

LICENSING BRANCH PROFESSIONAL AND VOCATIONAL LICENSING DIVISION DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS

NOTICE OF LICENSURE	Professional and Vocational Licensing Division Department of Commerce and Consumer Affairs State of Hawaii			
This is authorization to act as a MORTGAGE SOLICITO	R until such time that a license is processed.			
THIS AUTHORIZATION IS VALID ONLY WHEN SIGNED E	BY THE EXECUTIVE OFFICER OF THE PROGRAM.			
Print name & mailing address of employer in block below:	License No. MS-			
	Effective Date			
	Expiration Date			
	Executive Officer			